| Under the Paperwork Reduction Act of 1995, no persons are require | | nt and Trademark Offi | PTO/SB/22 (or use through 7/31/2006. OMB 0651 ce; U.S. DEPARTMENT OF COMM nless if displays a valid OMB control or | |
|---|------------------------------------|------------------------|--|--|
| TITION FOR EXTENSION OF TIME UNDER 37 C | Docket Number (Optional) | | | |
| FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2009) | 3613-0102P | | | |
| pplication Number 09/911,733-Conf. #56 | 501 | Filed July 25, 2001 | | |
| or PRODUCT COST CONTROL GRAPHICAL USE | R INTERFACE | | | |
| t Unit 2179 | | Examiner | S. M. Hanne | |
| his is a request under the provisions of 37 CFR 1.136(a | a) to extend the | period for filing a | a reply in the above | |
| ne requested extension and fee are as follows (check t | time period des | ired and enter the | e appropriate fee below): | |
| X One month (37 CFR 1.17(a)(1)) | <u>Fee</u> \$120 | Small Entity I \$60 | <u>Fee</u> \$ 120.00 | |
| Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ | |
| Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ | |
| Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ | |
| Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ | |
| | · | 4.000 | | |
| Applicant claims small entity status. See 37 CFR | R 1.27. | | | |
| X A check in the amount of the fee is enclosed. | | | | |
| Payment by credit card. Form PTO-2038 is attac | | | | |
| The Director has already been authorized to char | ge fees in this a | application to a D | eposit Account. | |
| The Director is hereby authorized to charge any for Deposit Account Number 02-2448 | | • | redit any overpayment, to copy of this sheet. | |
| I am the applicant/inventor. | | | | |
| assignee of record of the entire in Statement under 37 CFR 3.73 | | | /96). | |
| x attorney or agent of record. Regis | | | | |
| attorney or agent under 37 CFR 1 | .34. | - | | |
| Registration rumber if acting under | 37 CFR 1.34 | | · | |
| - Cle / chway hay | | Feb | ruary 21, 2006 | |
| Signature | | <i>,</i> —, | Date | |
| Joe McKinney Muncy Typed or printed name | (703) 205-8000 Telephone Number | | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire than one signature is required, see below. | interest or their repre | | | |
| | | | | |

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| Press pursuant to the Comolected Appropriators Act, 2005 (MR. 4818), Application Number D9/9911,733-Conf. #5601 | 1000 B | work Reduction Act of | 1995 no person a | are requi | | | Approved for use t Trademark Office; U. | hrough 7/31/20 S. DEPARTME | NT OF COMM | | | | |
|---|---|-----------------------|------------------|---|--|-------------------|--|-------------------------------|------------|--|--|--|--|
| FEE TRANSMITTAL FOR TY 2005 Applicant claims small entity status. See 37 CFR 1.27 And Unit 2179 METHOD OF PAYMENT (\$) 120.00 Attorney Docket No. 3613-0102P METHOD OF PAYMENT (\$) 120.00 Attorney Docket No. 3613-0102P METHOD OF PAYMENT (Check all that apply) X Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 02-2448 Deposit Account Number 02-244 | | | | | red to respond to a collection of information unless it displays a valid OMB control nu Complete if Known | | | | | | | | |
| FOR FY 2005 First Named Inventor Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00 Attorney Docket No. 3613-0102P METHOD OF PAYMENT (check all that apply) Check | | | | <u> </u> | | | onf. #5601 | | | | | | |
| FOR FY 2005 First Named Inventor Applicant claims small entity status. See 37 CFR 1.27 Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 120.00 Attorney Docket No. 3613-0102P METHOD OF PAYMENT (check all that apply) Check | | | | Filing Date | July 25, 2001 | <i>,</i> 25, 2001 | | | | | | | |
| Application Type Fee (5) Fee (5) Fee (5) Fee (5) Fee (6) Plant 200 Reissue 300 | | | | | | | 3 | | | | | | |
| METHOD OF PAYMENT (S) 120.00 Attorney Docket No. 3613-0102P | For FY 2005 | | | Examiner Name S. M. Hanne | | | | | | | | | |
| METHOD OF PAYMENT (check all that apply) X Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number 02-2448 Deposit Account Name Birch, Stewart, Kolasch & Birch, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of (recis) under 37 CFR 1.16 and 1.17 FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES Small Entity Fee (\$) F | Applicant claims small entity status. See 37 CFR 1.27 | | | | Art Unit | | | | | | | | |
| Check | TOTAL AMOUNT OF PAYMENT (\$) 120.00 | | | Attorney Docket | No. | 3613-0102P | 3613-0102P | | | | | | |
| Deposit Account Deposit Account Number Q2-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP | METHOD OF PAYMENT (check all that apply) | | | | | | | | | | | | |
| Deposit Account Deposit Account Number Q2-2448 Deposit Account Name. Birch, Stewart, Kolasch & Birch, LLP | x Check Credit Card Money Order None Other (please identify): | | | | | | | | | | | | |
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| Search S | Charge any additional fee(s) or underpayment of X Credit any overpayments | | | | | | | | | | | | |
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| Pick | | | NATION EEE | 6 | | | · | * | | | | | |
| Design 200 100 100 50 130 65 | | FILING | FEES | SE | Small Entity | | Small Entity | | aid (\$) | | | | |
| Plant | | 300 | 150 | 500 | 250 | 200 | 100 | | | | | | |
| Reissue 300 150 500 250 600 300 Provisional 200 100 0 0 0 0 0 0 2. EXCESS CLAIM FEES | Design | 200 | 100 | 100 | 50 | 130 | 65 | | | | | | |
| Provisional 200 100 0 0 0 0 0 0 | Plant | 200 | 100 | 300 | 150 | 160 | 80 | | | | | | |
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| Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 (round up to a whole number) x = 4. OTHER FEE(\$) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00 SUBMITTED BY Registration No. (Attorney/Agent) 32,334 Telephone (703) 205-8000 | 1 ' ' | | - (¢) | Ean E | oid (\$\ | | fultinle Depends | | 100 | | | | |
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| SUBMITTED BY Signature Registration No. (Attorney/Agent) 32,334 Telephone (703) 205-8000 | Non-English Specification, \$130 fee (no small entity discount) | | | | | | | | | | | | |
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| | SUBMITTED BY | Λ. | ** | | | | | | | | | | |
| | Signature | Mckmes 1 | may | | | 32,334 | Telephone | (703) 205- | 8000 | | | | |
| | Name (Print/Type) Joe M | | | | | | Date | ebruary 21 | , 2006 | | | | |